PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001								Application or Docket Number				
								MAC-206				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	MALL E	NTITY	OR	OTHER	
TOTAL CLAIMS			7				Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		e	BASIC FE	E 370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		• Ø		81	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			A minus 3 =		• 3		ŀ	X42=	 	OR	X84≈	
MULTIPLE DEPENDENT CLAIM P			RESENT				t	+140=			+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				L		1-100	OR		
//_/_ CLAIMS AS AMENDED - PART II								TOTAL	570	OR	TOTAL	
//	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	, t,	HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL \FEE		RATE	ADDI- TIONAL \ FEE
	Total	• 7	Minus	"á	30	-\/		X\$ 9=		OR	X\$18≈	
	Independent	.3	Minus	77 /	3	- /	r	X42=	T X	OR	X84=	X
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	1/1	OR	+280=	/
2	11/						L	TOTA		OR	TOTAL	/ \
7	4/04	(Column 1)		(Colu	mn 21	(Column 3)	AI	DOIT. FEI	Ĕ Ĺ	Į On	ADDIT, FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUM PREVI	IËST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 7	Minus	0	30	3		X\$ 9=	\	ÓA	X\$18=	\
	Independent	* /	Minus	***	3	-		X42=		ОЯ	X84≈	
L	FIRST PRESE	NTATION OF MI	JUINTE DE	PENDEN	CLAIM	<u>' </u>	'	+140=	7	OR	+280=	X
							L	TOTAL		OR	TOTAL ADDIT, FEE	V V
		(Column 1)		(Colu	mn 2)	(Column 3)	-44	JUII. PCI	-		AUDII. PEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	640			Г	X\$ 9≈		OR	X\$18=	
	Independent	•	Minus	***	101	2	1	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		-		1	OR		
• 1	• If the entry in column 1 is less than the entry in column 2, write "0" in column 3,									OR	+280=	
**	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	ADDIT. FEE	L
		ber Previously Pa					r foun	d in the a	ppropriate bo	x in co	kumn 1.	

FORM PTO-875 (Rev. 8/01)

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